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CONFIRMATION NO. 8229

SERIAL NUMBER 10/533,926	FILING OR 371(c) DATE 05/04/2005 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 512100-2046	
APPLICANTS Hans-Rainer Hoffmann, Neuwied, GERMANY; Reinhard von Kleinsorgen, Bendorf, GERMANY; Werner Wessling Beethovenstr, Rengsdorf, GERMANY;					
** CONTINUING DATA ***** This application is a 371 of PCT/EP03/11529 10/17/2003					
** FOREIGN APPLICATIONS ***** GERMANY 102 51 963.3 11/08/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY GERMANY	SHEETS DRAWING	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
ADDRESS William F Lawrence Frommer Lawrence & Haug 745 Fifth Avenue New York ,NY 10151					
TITLE Transmucosal pharmaceutical administration form					
FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		